PCTUS1/REV03

U.S. APPLICATION NO. (IF KNOWN, SE			INTERNATIONAL APPLICATION NO. PCT/AU97/00124			ATTORNEY'S DOCKET NUMBER 11658			
20.	The fol	lowing fees are submitted:.					CALCULATION	S PTO USE ONLY	
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)) :									
☐ Search Report has been prepared by the EPO or JPO									
No international preliminary examination fee paid to USPTO (37 CFR 1.482)									
121	but international search fee paid to USPTO (37 CFR 1.445(a)(2))								
Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2) paid to USPTO)			
☐ International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4)									
ENTER APPROPRIATE BASIC FEE AMOUNT =							\$1,070.00		
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492 (e)).							\$130.00		
CL	AIMS	NUMBER FILED	NUMBER EXT	RA	RATE				
Total claims		41 - 20 =	21		x \$22.00		\$462.00		
	endent claims	8 - 3 =	5		x \$82.00)	\$410.00		
Multiple Dependent Claims (check if applicable).			TAROTE CAT	NY 14 A FE	ATIONS		\$270.00		
TOTAL OF ABOVE CALCULATIONS =							\$2,342.00		
Reduction of 1/2 for filing by small entity, if applicable. Verified Small Entity Statement must also be filed (Note 37 CFR 1.9, 1.27, 1.28) (check if applicable).							\$0.00		
SUBTOTAL =							\$2,342.00		
Proces month	Processing fee of \$130.00 for furnishing the English translation later than								
TOTAL NATIONAL FEE = \$2,342.00									
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) (check if applicable).									
TOTAL FEES ENCLOSED =							\$2,342.00		
							Amount to be: refunded	\$	
							charged	\$	
A check in the amount of \$2,342.00 to cover the above fees is enclosed.									
Please charge my Deposit Account No. in the amount of to cover the above fees.									
A duplicate copy of this sheet is enclosed.									
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 19-1013/SSMP A duplicate copy of this sheet is enclosed.									
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR									
1.137(a) or (b)) must be filed and granted to restore the application to pending status.									
SEND ALL CORRESPONDENCE TO:									
Leopold Presser SIGNATURE									
Registration No. 19,827 SCULLY, SCOTT, MURPHY & PRESSER Leanneld Presser									
400 Garden City Plaza							pold Presser /		
Garden City, NY 11530 (516) 742-4343									
17,027									
							ATION NUMBER		
						September 1, 1998			
LP/v	js		:	DATE					